



March 1, 2011

Statement  
Of  
Anthem Blue Cross and Blue Shield  
On  
HB 6472 An Act Concerning Health Insurance Coverage For  
Ostomy Supplies  
And  
SB 1085 An Act Concerning Health Insurance Coverage For Colonoscopies

Good afternoon, Senator Crisco, Representative Megna and members of the Insurance and Real Estate Committee. My name is Christine Capiello and I am the Director of Government Relations for Anthem Blue Cross and Blue Shield in Connecticut. I am here today to reluctantly speak on **HB 6472 An Act Concerning Health Insurance Coverage For Ostomy Supplies And SB 1085 An Act Concerning Health Insurance Coverage For Colonoscopies.**

We are concerned about these because they seek to add a new mandate for all individuals and group policies, including the State of Connecticut State Employees Health Insurance Plan. Mandates remove any choice that employers or individuals might have in purchasing health care. Our goal as a managed care organization is to provide a comprehensive meaningful set of benefits to individuals and employers purchasing our product. How we accomplish this goal changes as the needs and desires of the market changes. Mandating benefits take away the flexibility insurers have in developing products in response to the needs of the marketplace. The cost of mandates may cause the purchasers of health care, specifically employers to stop offering health insurance all together.

We also would like to point out that HB 6472 while raising the annual cap on ostomy supplies may contradict with federal healthcare reform, Patient Protection and Affordable Care Act (PPACA), which has a provision that removes the annual maximums on certain healthcare services including ostomy supplies. This would create a situation where the state law is actually less of a benefit for members and they would be restricted to the \$5,000 cap rather than an unlimited cap under PPACA.

Thank you for the opportunity to speak to you today and I welcome any questions you might have.